

**ROLE OF TAILADHARA AND UPANAHA FOR JOINT RESCUE**

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Bangalore, Karnataka, India**ABSTRACT**

*Vatavyadhi* as mentioned by *Acharya caraka* consists of gamut of various disorders caused by vitiated *vata dosha* in various parts of the body. *Sandhigata vata* is one among the crippling disorders affecting the locomotor system by deranging the major joints of the body presenting with *Sandhishoola*, *Sandhi shotha*, *Prasarana akunchana vedana*, and *Sandhi atopa* which simulates with the OA according to the modern science with similar features such as pain, stiffness, swelling in joints, crepitus and difficulty in movement. Knee joint being the major weight bearing one is more prone for wear and tear, resulting with the early degenerative changes, with the steady raise in prevalence from the age 30 such that by 65 years, 80% of people have radiographic evidence of OA. *Aani marma* and *Janu marma* are located in the *Janu pradesha*, both being *Vaikalyakara marma* when injured presents with symptoms such as increased pain, inflammation, lameness, limping or loss of movement, which are similar as that caused by vitiated *vata dosha* when present in *Janu sandhi*. *Bahya snehana* and *swedana* are two important treatment modalities to combat *vata dosha*. *Snehana* and *Upanaha* are directly recommended in *Sandhigata vata*. Hence *Tila tailadhara* as *snehana* and *Astishrunkala upanaha* as *swedana* can be a promising combination of treatments which can be effectively adopted in treating the vitiated *vata dosha* in *sandhi pradesha*.

**Keywords:** *Ayurveda, Taila dhara, upanaha, sandhigata vata*

**INTRODUCTION**

The goal of medicine is to prevent disease, restore health and reduce the suffering. Richness of *ayurveda* lies in the fact that it mainly aims to restore *arogya* (health) which is the prime requisite to attain *Dharma, Artha, Kama*, and *Moksha*.

Disease is the destroyer of health causing hindrances for the attainment of salvation. Certain set of disorders which affect the musculoskeletal system can be the best example for the above as they hamper the locomotion which is one of the important needs of the living beings in order to fulfil the personal needs, to carry

out their daily activities and is essential for the survival.

*Amavata*, *Sandhivata*, *Koshtukashirsha*, *vatarakta* etc., are the set of disorders that affects the joints. *Janu sandhi* being the major weight bearing one is more prone for wear and tear and gets mainly affected by the vitiated *vata* leading to a condition known as *Sandhigata vata*, presenting with *Sandhishoola*, *Sandhishotha*, *prasarana akunchana vedana* and *Sandhi atopa*<sup>1</sup>. In modern parlance, the features simulates with OA which is characterised by pain, stiffness, swelling in joints, difficulty in movement and Crepitus<sup>3</sup>. There are certain

vital points in the body, which when injured causes ailments such as pain, deformities or even death. They are termed as *marmas*. In *janu pradesha* there are two such vital points namely *Aani marma* and *Janu marma*<sup>2</sup>. *Janu marma* is a type of *Sandhi marma* and is located at the meeting place of calf and thigh, which when injured causes Lameness or limping<sup>5</sup>. *Ani marma* is located 3 *angulas* (6cm) above the *janu marma* which when injured causes increase of swelling, loss of movement of the joint and severe pain<sup>6</sup>. Both *Janu marma* and *Aani marma* comes under *Vaikalyakara marma*. When *Vaikalyakara marma* is injured the person suffers with deformities only, if the body is protected by the efficiency of the Physician. As the *vaikalyakara marma* is *saumya* (dominated by water or moon) there will be stability and sustenance of life and only limits with causing deformities when injured. Similar features are seen in the chronic cases of OA causing loss of movement, severe pain and deformities of the affected joints. According to *ayurveda* there can be no *vyadhi* without the involvement of *Vata dosha*, which is also same in *marmabhighata*. Hence the treatment should primarily aim to pacify vitiated *vata*. Among different types of *vatopakramas*, *Bahya snehana* and *swedana* are said to be best to pacify *vata* in localised area. Hence the use of *Tila taila dhara* as *snehana* and *Astishrunkala Upanaha* as *swedana karma* can be more promising line of treatment in *marmabhighata* pertaining to *Janu pradesha*.

### **Tailadhara**

*Dharakarma* is one of the treatments mentioned under *Murdhni taila chikitsa* as *shirodhara*. The same *dhara* treatment can be applied on whole body

and is considered as *Sarvanga dhara* or for the localised part as *Ekanga dhara*. Different types *dharas* are done based on the medicament used and is called as *Taila dhara* when the *aushadha dravya* is used along with *taila* as the medium<sup>4</sup>. *Taila* is considered as the best *Vatashamaka* and *Tailadhara* can be successively adopted in *Vatavikaras*. *Tila taila* is said to be the best *vata shamaka* owing to its properties such as *Madhura Kashaya Tikta rasa, guru* and *snigdha guna, Ushna veerya, Madhura vipaka*<sup>7</sup>. It also act as *Shotahara*.  
*Upanaha*

“*Upanaho bahalam lepam dattva charmabhiravrutya vyadhiyukta angasya bandhanam*”

According to *Chakrapani Upanaha* means application of thick *lepa* over the diseased part and tying it with the help of a leather piece.

*Astishrunkala Upanaha* can be taken under *Niragni, Snigdha* type of *upanaha* which is applied for *Ekanga*. *Astishrunkala* (*Cissus quadrangularis*) is a drug with *Madhura rasa, Ushna veerya, Madhura vipaka* by which it does *Vata* and *Kapha shamana* and hence is very useful in treating *Asthigata vikaras* such as *bhagna, shotha* etc<sup>8</sup>.

Since *Vata* is the main *dosha* involved in *Marmabhighata*, *Snehana* in the form of *Tila taila dhara* followed by *Astishrunkala upanaha* can be effectively adopted to combat *Vata dosha* involved in the pathogenesis of *marmabhighata*.

### **DISCUSSION**

The general line of treatment as explained in the context of *Gata Vatas* for *Sandhigata Vata* is “*Sneha Upanaha Agnikarma Bandhana Unmardanani Cha*”. Hence *Snehana* in the form of *Tila taila dhara* and *Swedana* as *upanaha* would be promising to relieve the symptoms.

*Snehana* in internal as well as external use is said to combat aggravated *Vata*. This helps significantly in preventing the rate of degeneration and helps in restoring the joint mobility. The trans-dermal absorption depends upon the lipid solubility of the drugs and hence *taila* acts as means to carry the potency of the drugs (*Tila*) to penetrate the epidermis.

*Upanaha* being a type of *swedana* acts as *shoolahara* and *shothahara*. The drug used, i.e., *Asthishrunkala* is rich in phyto-genic steroid, keto steroids, sitosterol and Vitamin-C. Phyto-genic Steroids showed bone healing properties while Coloside-A posses smooth muscle relaxant effect.

Probable mode of action

*Taila dhara* and *Upanaha sweda* are considered as *Bahyopakramas/Bahir Parimarjana Chikitsa*. Mode of action of the *dravyas* is said to be same for both the treatment modalities. According to *Acharya Sushruta*, the *veerya* of the *dravyas* applied over the skin is absorbed by the *Tiryagaami dhamanis* which are present all over the body and are attached to *Romakoopas*. Through the openings of these *Romakoopas*, enter the *veerya* of the *dravyas* used in *taila dhara* and *upanaha* that are carried through *Tiryagaami dhamanis* and reaches the target part. Hence, there will be pacification of the vitiated *doshas*.

The combined effect of *snehana* in the form of *Tila taila dhara* and *Swedana* in the form of *Upanaha* reaches the structures involved in *Aani Marma* and *Janu Marma* and hence, the symptoms such as pain, loss of movement, swelling, etc., will be relieved.

## CONCLUSION

*Janu Marma* which is a type of *Sandhimarma* involving anatomical structures such as knee joint, posterior

cruciate ligament, oblique posterior ligament, Plantaris and Gastrocnemius muscles, popliteal artery and vein, Femur, Tibia & Patella bones, Medial Popliteal nerve is the anastomosis of various structures, when injured causes severe pain, edema, difficulty in walking, disfigurement and impairment of all the functions of the joint. Likewise, *Aani Marma*, which is a type of *Snayu Marma*, situated 3 *angulas* above the *Janu Marma* comprises of Medial and Lateral ligaments of the knee joint, Quadriceps femoris, Adductor magnus muscles, Femoral artery, tributaries of Femoral vein and Cephanus nerve. When injured it causes severe pain and loss of functions of knee joint. The symptoms caused due to the *Marmabhighata* of both the *marmas* seem to be because of *vata dosha* as *shoola* is the main symptom. Hence, *Vatahara* line of treatment adopted in the form of *Snehana* and *Swedana* gives better relief from the symptoms, also hindering the progression of degenerative changes of the articular joint and other structures involved which further can be managed by advising the patient to do *marma paripalana* by avoiding trauma, doing exercises, regularly anointing the body, etc.

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